

For Ecology Use

Fee Paid 10.00

Date 12/1/98

11/002395422616

State of Washington  
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name BEVE SPEARS Home Tel: ( 509 ) 782-3254  
Mailing Address 111A WHITE BIRCH Work Tel: ( 509 ) 782-3254  
City CASHMERE, State WA. Zip+4 98815 +      FAX: (      )      -     

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name JOHN W. PICKENS Home Tel: ( 509 ) 834-7696  
Mailing Address P.O. BOX 5168 Work Tel: (      )      -       
City WENATCHEE State WA. Zip+4 98807 + 5168 FAX: ( 509 ) 662-3231  
Relationship to applicant FEE CONSULTANT

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 20 ( ☒ gallons per minute or ☐ cubic feet per second ) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s) of COMMERCIAL USE. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 32.31

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From      /      /      to      /      /     

Section 4. WATER SOURCE

If SURFACE WATER						If GROUNDWATER		
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:						A permit is desired for <u>1</u> well(s).		
Number of diversions: <u>    </u>								
Source flows into (name of body of water):						Size & depth of well(s): Size, <u>6"</u> Depth <u>50'</u>		
LOCATION Located on Subject Property per attached diagram								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>Section 5, Township 23 North, Range 19 East</u> <u>NW 1/4 NE 1/4 : NW Corner 400' South, 400' East</u>								
1/4 of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
NW	NE 1/4	5	23N	19 E/W	Chelan			
For Ecology Use Date Received: <u>DECEMBER 1, 1998</u> Priority Date: <u>DECEMBER 1, 1998</u>								
SEPA: Exempt/Not Exempt FERC License # <u>    </u> Dept. Of Health # <u>    </u>								
Date Accepted As Complete <u>JANUARY 11, 1999</u> By <u>PMK</u> Date Returned <u>    </u> By <u>    </u> WRIA: <u>45</u>								



Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: Spears Commercial Center Wellfield
- B. Briefly describe your proposed water system. (See instructions.)  
This system was established in 1984
- A. Well drilled and reported by Tumwater Drilling Company, , Leavenworth, WA. Drilling report was represented by Mr. Steve Ballew, Owner to have been drilled and wigned on 12/14/84. , and forwarded to Washington State Departments of Ecology and Department of Health.. Ecology shows receipt on February 21, 1985
- B. Spears Construction, General Washington Contractor installed 2" steel conduit piping to connected structures Estimated connections , (9)
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO  
PROVIDE DOCUMENTATION.  
This application is being made at this time, 10/27/98

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION  
(Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 9 Type of connection Domestic and Commercial Water  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☒ YES ☐ NO  
to appropriate function in each building.  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

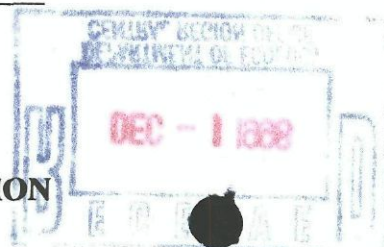
Complete C. and D. only if the proposed water system will have fifteen or more connections.

- NOT APPLICABLE
- C. Do you have a current water system plan approved by the Washington State Department of Health? ☒ YES ☐ NO  
If yes, when was it approved? 1985 Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☒ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION  
(Complete for all irrigation and agriculture uses.)

- NOT APPLICABLE
- A. Total number of acres to be irrigated: \_\_\_\_\_
- B. List total number of acres for other specified agricultural uses:
- | Use          | Acres       |
|--------------|-------------|
| Use _____    | Acres _____ |
| Use _____    | Acres _____ |
| Use <u>0</u> | Acres _____ |
- C. Total number of acres to be covered by this application: 3.93, per Assessor, Chelan County
- D. ALL COMMERCIAL USE, ALL NON-AGRICULTURAL  
Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:  
‡ Acreage irrigated under water rights acquired after December 8, 1977;  
‡ Acreage proposed to be irrigated under this application;  
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☒ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO  
If yes, enter permit no: \_\_\_\_\_
- E. Farm uses: NOT-APPLICABLE  
Stockwater - Total # of animals \_\_\_\_\_ Animal type \_\_\_\_\_ (If dairy cattle, see below)  
Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_

APPLICATION





## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

1. Drive on SR 2-97, 12 Mi. NW of City of Wenatchee to Applets Way intersection in City of Cashmere. Continue two blocks to intersection of Applets Way and Sunset Way. Turn right at this intersection and continue a proximately 1 mile to site. Located on left side of Sunset Way.

## Section 10. REQUIRED MAP

- A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

- A. Does the applicant own the land on which the water will be used? ☒ YES ☐ NO  
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

Applicant has owned land and associated improvements since 1962. Current use was developed from a concrete wash plant, through excavation arrangement between 1962 and 1982.

Reference: Records of Chelan County, Statutory Warranty Deed, 5/31/62, Grantor ~~Les Kane et ux, Grantee, Beve Spears et ux.~~ Book 635, Page 332.

- B. Does the applicant own the land on which the water source is located? ☒ YES ☐ NO  
If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

John W. Pickens  
John W. Pickens, Authorized Representative

Beve T. Spears  
Beve Spears, Applicant

10/27/98  
Date

Applicant (or authorized representative)

Beve T. Spears

10/27/98

Beve Spears  
Landowner for place of use (if same as applicant, write "same")

Date



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

Applicant indicated to Consultant in 1997, that no Water Right Application had been filed previously, to his knowledge, over the years of his ownership of this system.

No Claim had been previously filed during the allowable periods of the Washington State Claims Registration act, until latest allowable period ending 6/30/98.  
This Claim has been received by State Department of Ecology.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:  	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).